

Notice of Allowance dated:
December 2, 2004

PART B - FEE(S) TRANSMITTAL Docket No.: AM998080C

Complete and send this form, together with applicable fee(s), to: Mail

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International Business Machines Corporation
650 Harry Road, C4TA/J2B
San Jose, CA 95120-6099

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

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02/25/2005 MBEYENE2 00000033 090441 09551745

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/551,745	04/18/2000	Daniel Manuel Dias	AM9-98-080C	2613

TITLE OF INVENTION: REAL-TIME SHARED DISK SYSTEM FOR COMPUTER CLUSTERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	03/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NAMAZI, MEHDI	2188	711-151000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 John L. Rogitz

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Business Machines Corporation, Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0441 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature _____

Date December 15, 2004

Typed or printed name John L. Rogitz

Registration No. 33,549

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

Docket No. AM998080C
(PATENT)

SIR:

Transmitted herewith for filing in the Application of: DIAS Serial No.: 09/551,745

Title: **REAL-TIME SHARED DISK SYSTEM FOR COMPUTER CLUSTERS**

are the following:

- sheets of formal drawings
- Amendment
- Amendment after Final Rejection
- Response to Restriction Requirement
- Letter to Drawing Review Branch
- Certificate of Correction
- Other -
- NO ADDITIONAL FEE IS REQUIRED

- Basic Filing Fee(\$740.00)
- Information Disclosure Statement
- Declaration and Power of Attorney
- Assignment of the Invention(\$40.00)
- Recordation Form Cover Sheet
- Notice to File Missing Parts(\$130.00)
- Petition for Extension of Time(\$110.00)
- Issue Fee(\$1,400.00)
- Publication Fee(\$300.00)
- Appeal Brief(\$320.00)

OTHER THAN A SMALL ENTITY	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	EXTRA	RATE	ADDITIONAL FEE
SUBTOTAL FROM ABOVE					\$1400.00
ADDITIONAL CLAIMS				x 18 =	
INDEPENDENT CLAIMS				x 80 =	
MULTIPLE DEP. CLAIMS PRESENTED				+260 =	
TOTAL					\$1400.00

Please charge my Deposit Account No. 09-0441 in the amount of \$1400.00. A duplicate copy of this sheet is attached.

The Commissioner is hereby authorized to charge payment for any additional filing fees required under 37 CFR 1.16 or any patent application processing fees under 37 CFR 1.17 in association with this communication or credit any overpayment to Deposit 09-0441.

Respectfully submitted,
Daniel Manuel Dias

CERTIFICATE OF MAILING

I hereby certify that the above paper/fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, Alexandria, VA 22313

Date of Deposit: _____
Person mailing paper/fee: _____

Signature _____


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